

INTEROFFICE CORRESPONDENCE
SUN CHEMICAL CORPORATION

Sun Std. 19

TO	Environmental Protection Administration	FROM	Thomas M. Basil Sun Chemical Corporation
LOCATION	Various Districts	LOCATION	200 Park Avenue New York, NY 10166
ANSWERING		DATE	July 15, 1982
SUBJECT	Certificate of Insurance - Sudden & Accidental Pollution		

Attached please find our Certificate of Insurance indicating coverage up to \$500/\$500. The Excess Certificate to \$1,000/\$2,000 will follow within the next day or two.

TMB:mod

cc: H. Shotwell

Thomas M. Basil

NEW YORK AGENCY PROTECTION
NEW YORK, NEW YORK 10007
JUL 20 5 42 PM '82
ENVIRONMENTAL PROTECTION
ADMINISTRATION
U.S. DEPARTMENT OF JUSTICE



**INSURANCE COMPANY OF NORTH AMERICA
GROUP OF INSURANCE COMPANIES**

(This Certificate of Insurance neither affirmatively nor negatively amends, extends or alters the coverage, limits, terms or conditions of the policies it certifies.)

**HAZARDOUS WASTE FACILITY
CERTIFICATE OF POLLUTION LIABILITY INSURANCE**

1. Insurance Company of North America, (the Insurer) of
Sun Chemical Corporation, hereby certifies that it has issued
pollution liability insurance covering bodily injury and property damage to Sun Chemical Corporation

(the Insured), of 200 Park Avenue New York, N.Y. 10166, in connection
with the Insured's obligation to demonstrate financial responsibility under 40 CFR 264.147 or 265.147. The coverage applies at

See Attached Schedule

for "Sudden and Accidental Occurrences"

The limits of liability are \$ 500,000 and \$ 500,000 annual aggregate,
exclusive of legal defense costs. The coverage is provided under policy number SCG 209076 issued on 7/1/82.
The effective date of said policy is 7/1/82.

The insurance hereby certified is either primary or excess insurance, as indicated by "X" for the limits shown:

- ☒ The insurance hereby certified is primary and the Insurer shall not be liable for amounts in excess of
\$ 500,000 , \$ 500,000 annual aggregate, exclusive of legal defense costs.
- ☐ The insurance hereby certified is excess and the Insurer will not be liable for amounts in excess of
\$ _____ , \$ _____ annual aggregate, exclusive of legal defense costs,
in excess of the underlying limits of \$ _____.

2. The Insurer further certifies the following with respect to the insurance described in Paragraph 1:

- (a) Bankruptcy or insolvency of the Insured shall not relieve the Insurer of its obligations under the policy.
- (b) The primary Insurer is liable for the payment of amounts within any deductible applicable to the policy, with a right of reimbursement by the Insured for any such payment made by the Insurer. This provision does not apply with respect to that amount of any deductible for which coverage is demonstrated as specified in 40 CFR 264.147 (f) or 265.147 (f).
- (c) Whenever requested by a Regional Administrator of the U.S. Environmental Protection Agency (EPA), the Insurer agrees to furnish to the Regional Administrator a signed duplicate original of the policy and all endorsements.
- (d) Cancellation of the insurance, whether by the Insurer or the Insured, will be effective only upon written notice and only after the expiration of sixty (60) days after a copy of such written notice is received by the Regional Administrator(s) of the EPA Region(s) in which the facility(ies) is (are) located.
- (e) Any other termination of the insurance will be effective only upon written notice and only after the expiration of thirty (30) days after a copy of such written notice is received by the Regional Administrator(s) of the EPA Region(s) in which the facility(ies) is (are) located.

I hereby certify that the wording of this instrument is identical to the wording specified in 40 CFR 264.151 (j) as such regulation was constituted on the date first above written, and that the Insurer is licensed to transact the business of insurance, or eligible to provide insurance as an excess or surplus lines insurer, in one or more States.

Bernard D. Hill
(Signature of authorized representative of Insurer)

Assistant Account Executive

(Title), Authorized Representative of

127 John Street

New York, New York

10038

(Address of Representative)

Bernard D. Hill

(Type name)

Insurance Company of North America

(name of Insurer)

CERTIFICATE OF POLLUTION LIABILITY INSURANCE
SCHEDULE OF LOCATIONS

- 1) Sun Chemical Corporation
185 Foundry St.
Newark, NJ 07100
EPA #NJD002458842
- 2) Sun Chemical Corporation
441 Thompkins Avenue
Rosebank,,Staten Island, NY 10305
EPA # NYD990692378
- 3) General Printing Ink., Division - Sun Chemical Corporation
631 Central Avenue
Carlstadt,NJ 07072
EPA # NJD-001563147
- 4) General Printing Ink. Division - Sun Chemical Corporation
390 Central Avenue
East Rutherford,NJ 07073
EPA # NJD-002007151
- 5) General Printing Ink., Division - Sun Chemical Corporation
795 Beahan Rd.
Rochester, NY 14624
EPA # NYD-041288689
- 6) General Printing Ink., Division - Sun Chemical Corporation
500 Industrial Avenue
Teterboro, NJ 07608
EPA-NJD-000632299

INTEROFFICE CORRESPONDENCE
SUN CHEMICAL CORPORATION

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TO	Environmental Protection Administration	FROM	Thomas M. Basil Sun Chemical Corporation
LOCATION	Various Districts	LOCATION	200 Park Avenue New York, NY 10166
ANSWERING		DATE	July 20, 1982
SUBJECT	Certificate of Insurance - Sudden & Accidental Pollution		

Joe Cvinar
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PAR

In accordance with my letter of July 15 with which I enclosed the Certificate for Primary coverage, enclosed please find the Excess Certificate to \$1,000/\$2,000.

Thomas M. Basil/mod
Thomas M. Basil
Director, Corporate Insurance

TMB:mod

cc: H. Shotwell

GRANTS ADMINISTRATION
BRANCH
REGION II
JUL 28 9 10 AM '82
ENVIRONMENTAL PROTECTION
AGENCY
NEW YORK, NEW YORK 10007

ENVIRONMENTAL PROTECTION
AGENCY
NEW YORK, N.Y.
JUL 23 11 41 AM '82
CORRESPONDENCE CONTROL
REGION II

NEW YORK, N.Y.
REGION II
PROTECTION AGENCY
U.S. ENVIRONMENTAL
JUL 28 10 33 AM '82
DIVISION
ENVIRONMENTAL MANAGEMENT

HAZARDOUS WASTE FACILITY CERTIFICATE OF LIABILITY INSURANCE

1. The American Centennial Insurance Co. _____, (the "Insurer"), of
Morristown, New Jersey _____ hereby certifies that it has
issued liability insurance covering bodily injury and property damage
to The Sun Chemical Corporation _____, (the "Insured,") of
200 Park Avenue; New York, N.Y. _____ in connection with the
Insured's obligation to demonstrate financial responsibility under 40CFR
264.147 or 265.147. The coverage applies at:

<u>EPA Identification Number</u>	<u>Name</u>	<u>Address</u>
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See schedule attached.

for sudden accidental occurrences. The limits of liability are \$4,500,000.00
each occurrence and \$4,500,000.00 annual aggregate, exclusive of
legal defense costs. The coverage is provided under policy number XC-00-25-04
issued on July 16, 1982 _____. The effective date of said policy is
July 1, 1982 _____. The insurance hereby certified is excess and
the insurer will not be liable for amounts in excess of \$4,500,000.00 per occurrence
\$4,500,000.00 annual aggregate, exclusive of legal defense costs,
in excess of the underlying limits of \$500,000.00 _____.

2. The Insurer further certifies the following with respect to the insurance
described in Paragraph 1:

- (a) Bankruptcy or insolvency of the Insured shall not relieve the Insurer
of its obligations under the policy.
- (b) The Insurer is liable for the payment of amounts within any deductible
applicable to the policy with a right of reimbursement by the insured
for any such payment made by the Insurer. This provision does not apply
with respect to that amount of any deductible for which coverage is
demonstrated as specified in 40CFR264.147(f) or 265.147(f).
- (c) Whenever requested by a Regional Administrator of the U.S. Environmental
Protection Agency (EPA), the Insurer agrees to furnish to the Regional
Administrator a signed duplicate original of the policy and all
endorsements.
- (d) Cancellation of the insurance, whether by the Insurer or the Insured
will be effective only upon written notice and only after the expiration
of sixty (60) days after a copy of such written notice is received by
the Regional Administrator (s) of the EPA Region (s) in which the facility
(ies) is (are) located.
- (e) Any other termination of the insurance will be effective only upon
written notice and only after the expiration of thirty (30) days after a
copy of such written notice is received by the Regional Administrator (s)
of the EPA Region (s) in which the facility (ies) is (are) located.

I hereby certify that the wording of this instrument is identical to the wording
specifies in 40CFR264.151 (j) as such regulation was constituted on the date first
above written, and that the Insurer is licensed to transact the business of
insurance or eligible to provide insurance as an excess or surplus lines insurer,
in one or more States.

Signature of Authorized Representative of Insurer _____

Name of Insurer

The American Centennial Insurance Co.

Typed Name

Title

Address

John A. Kraeutler

Company Representative

334 Madison Avenue; Morristown, N.J.

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EPA-NJD-000632299

SUN CHEMICAL CORPORATION

200 PARK AVENUE
NEW YORK, N.Y. 10166

EXECUTIVE OFFICES

212-986-5500

March 3, 1983

Mr. Joseph Cvinar
Grants Administration Branch
U.S.E.P.A.
26 Federal Plaza
New York, New York 10278

Re: Certificates of Insurance
Our Staten Island and Newark Plants

Dear Mr. Cvinar:

In accordance with the request of Mr. Robert Iuliucci of our Cincinnati location, I am enclosing copies of our Certificates of Pollution Liability Insurance for both primary and excess coverage. These were originally submitted in July of 1982.

I trust these will meet your requirements but should there be any further information needed, please do not hesitate to call.

Very truly yours,



Mary T. O'Donnell
Secretary
Corporate Insurance Department

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Enclosures

cc: R. Iuliucci

NEW YORK, N.Y.
ENVIRONMENTAL
MAR 10 8 05 AM '83
GRANTS ADMINISTRATION
BRANCH II